1356026

FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

OMB APPR	ROVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average burd	len
hours per response	16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix			Serial		
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	DA	TE RECEIV	ED		
			,		

	<u>/ </u>				·			
	Name of Offering (E check if this is an amendment and name has changed, and indicate change.)							
	Partnership Intere							
Filing I	Inder (Check box(es)) that apply):	☐ Rule 504	☐ Rule 505	■ Rule 506	☐ Section 4(6)	☐ ULOE	
Туре о	li Filing:	☐ New Filing	Amendment		, <u></u>	PRO	CESSED	
			A. BASIC II	ENTIFICATION	ON DATA			
1. Ente	r the information req	uested about the is	suer			MAN MAN	0 9 2007	
Name of Greyci	f Issuer (☐ check if to oft Partners, L.P.	this is an amendme	nt and name has cha	nged, and indicate			IOMSON	
	Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Agreede) 153 East 53 rd Street, 53 rd Floor, New York, New York 10022 (212) 756-3508							
	s of Principal Busine		Number and Street,	City, State, Zip Co	de) Telephon	e Number (Including	Area Code)	
(if diffe	rent from Executive	Offices)				C DEC 1	3 2006	
Brief E	escription of Busines	SS :				4	<u> </u>	
	e capital investment						156	
Type o	Business Organizati	on				161		
□с	orporation		ited partnership, alre		🗆 other (p	olease specify):	Y /	
b	usiness trust	_	ted partnership, to b	e formed			<u> </u>	
Month Year Actual or Estimated Date of Incorporation or Organization: 1 2 0 5 🖾 Actual 🗆 Estimated								
Actual of Batthaned Bate of Meet per attent of eigenstation								
Jurisdi	Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) D E							
		F I	CIN for Canada;	LIA for other foreit	gu Jurisuicuon)	<u>D </u>	<u>E</u>	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies: Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information requested	d for the following	g: '				
Each promoter of the issuer,Each beneficial owner having				% or more of a cl	ass of e	quity securities of the
issuer;					L: :	3
 Each executive officer and di Each general and managing r 	•	_	general and managing pa	artners of partners	nip issue	ers; and
				D.Dinastan		Carrellandlan
Check Lox(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	E	General and/or Managing Partner
Full Name (Last name first, if ind. Greycroft Managers, LLC						
Business or Residence Address 153 East 53rd Street, 53rd Floor,		treet, City, State, Zip Cod Vork 10022	е)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	×	Managing member of General Partner
Full Name (Last name first, if ind Patricof, Alan J.	ividual)					
Business or Residence Address 153 East 53 rd Street, 53 rd Floor,	•	treet, City, State, Zip Cod York 10022	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Β.	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	i				
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	ì				
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	i				
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	<u> </u>	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)	:				
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					_
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
	(Use blank shee	t, or copy and use addition	nal copies of this sheet, as	s necessary.)		

· • •	. '1		. •	B. IN	FORMA	TION AB	OUT OF	FERING		· •. •		*
	ař.	old, or does	the issuer in	tend to sell,	to non-accr	redited inve	stors in this	offering?			Yes	No ⊠
	•				• •	-	n 2, if filing					
2. Wha	t is the min	imum invest	ment that w	ill be accept	ed from any	y individual'	?),000 <u>*</u>
					1			*Sul	oject to wa	iver by the		
) Davi	a tha affarin	a narmit iai	nt oumarchi	n of a single	unit?						Yes 🗷	No □
										irectly, any		1
coni a pe state	mission or s rson to be l s, list the n		neration for ssociated pe broker or d	solicitation erson or age ealer. If mo	of purchas nt of a brok re than five	ers in conne er or dealer (5) person	ection with s registered v s to be liste	sales of sect with the SE	rities in the C and/or wi	offering. If th a state or		
Full N	me (Last nai	me first, if in	dividual)		,							
Busines	s or Resider	nce Address	(Numbe	er and Street	t, City, State	e, Zip Code))					
Name o	f Associated	Broker or I	Dealer									
States ir	Which Per	son Listed I	las Solicited	d or Intends	to Solicit P	urchasers						
(Che	ek "All Štate	es" or check	individual S	States)				***************************************				All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY} [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
 -		me first, if in				1 3		1	- Addison-A	L		
Busines:	s or Resider	nce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)					
Name o	f Associated	Broker or I	Dealer									ı
States in	Which Per	son Listed H	las Solicited	or Intends	to Solicit P	urchasers						
(Chec	k "All State	es" or check	individual S	States)	•••••		***************************************			·	🖸	All States
[AL]	[AĶ]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV]	[NH] [TN]	[NJ] [TX] '	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] {WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
		me first, if ir			1.51	h						
Busines	s or Resider	nce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)			· · · · · · · · · · · · · · · · · · ·		-;
Name o	f Associated	Broker or I	Dealer									
		• !										
		son Listed I										
(Chec	k "All State	s" or check	individual S	States)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] / [NJ] [TX] /	[NM]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this off sold. Enter "0" if answer is "none" or "zero." If the transaction is box □ and indicate in the columns below the amounts of the sealready exchanged.	an exchange offering, check this	!
	Time of Security	Aggregate Offering Price	Amount Already Sold
	Type of Security Debt		\$
	· ·		<u> </u>
	Equity Common Preferred	3	.
	Convertible Securities (including warrants)	S	S
	 		\$75,000,000.00
	Other (Specify)		\$
	Total		\$75,000,000.00
	Answer also in Appendix, Column 3, if filing under	er ULOE.	
2.	2. Enter the number of accredited and non-accredited investors who offering and the aggregate dollar amounts of their purchases, indicate the number of persons who have purchased securities at their purchases on the total lines. Enter "0" if answer is "none" or	For offerings under Rule 504, and the aggregate dollar amount of	
		Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		\$75,000,000.00
	Non-accredited Investors		\$0
	Total (for filings under Rule 504 only)		\$
_	Answer also in Appendix, Column 4, if filing und		
3.	3. If this filing is for an offering under Rule 504 or 505, enter securities sold by the issuer, to date, in offerings of the types incorprior to the first sale of securities in this offering. Classify sec Question 1:	licated, in the twelve (12) months	
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	 	\$
	Regulation A		\$
	Rule 504		. \$
	Total		\$
4.	 a. Furnish a statement of all expenses in connection with the securities in this offering. Exclude amounts relating solely issuer. The information may be given as subject to future of expenditure is not known, furnish an estimate and check the bo 	to organization expenses of the ontingencies. If the amount of an	
	Transfer Agent's Fees		\$
	Frinting and Engraving Costs		\$ 2,000.00
	Legal Fees.		\$ 100,000.00
	Accounting Fees		\$ 10,000.00
	Ingineering Fees		\$
	S'ales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	-	<u> </u>
		_	#
	, Total	E	\$ <u>112,000.00</u>

	C. OFFER	ING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND	USE OF PROCEI	EDS
	Question 1 and to	tal expenses furnished in	offering price given in response to Part C — response to Part C — Question 4.a. This of the issuer."		
	,	,			\$ <u>74,888,000.00</u>
	1			1	
5 Ind	licate below the amount	of the adjusted gross or	oceed to the issuer used or proposed to be used		l
for che	each of the purposes sheck the box to the left of	own. If the amount for an of the estimate. The total	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted Part C — Question 4.b. above.		
		! 	• ,	Payments to	
			4	Officers, Directors & Affiliates	Payments To
0	1.2	 			Others
					□ \$
					□ \$
		i i	inery and equipment		□ \$
	-		ities	. - \$	□ S
			e of securities involved in this offering that may		- .
			nother issuer pursuant to a merger)		□ \$
					□ \$
		· ·			□ \$ <u>74,888,000</u>
0	her (specify) Manag	ement Fee	·	× \$*	□ \$
_	· 	<u> </u>	<u> </u>		
i -			·		
					□ \$ <u>74,888,000</u>
T	otal Payments Listed (c	olumn totals added)		□ \$ <u>74,88</u>	<u> </u>
	1	į t	D. FEDERAL SIGNATURE		
	<u> </u>	<u>f</u>	D. T. E. D. E. C.		
signatı inform	re constitutes an undert	aking by the issuer to furn	e undersigned duly authorized person. If this notice ish to the U.S. Securities and Exchange Commissed investor pursuant to paragraph (b) (2) of Rule 50	ion, upon written requ	i05, the following est of its staff, the
Issue	(Print or Type)	i I	Signature	Date	1 /2
	eroft Partners, L.P.	i .	Clan 12/V		2/11/06
	of Signer (Print or Typ		Title of Signer (Print or Type)		/ /
Grey Issue	eroft Managers, LLC,	General Partner of	Managing Member of General Partner	/	
	Alan J. Patricof	Í	Managing Member of General Partner		
		1	<u> </u>	 	
ca	ital of the Limited Par	 equal to 2.5% of the aggre tners (other than \$4 millio	on committed by		
pe	ersons affiliated with or	related to the General Par	tner or its Managing Member).		
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	<u>}</u>				•
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	ri ii		ATTENTION		
	Intontional mines	tomonto ou omissio-	o of fact constitute federal estates	tions (Cas 19 II C	C 1001)